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## APPLICANTS

Allan Wexler, Pittsford, NY;

\*\* CONTINUING DATA \*\*\*\*\* None

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 2721	<b>INDEPENDENT CLAIMS</b> 21
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>msa</i> Initials				

## ADDRESS

Paul A. Leipold  
 Patent Legal Staff  
 Eastman Kodak Company  
 343 State Street  
 Rochester, NY 14650-2201

## TITLE

Inkjet recording element and method of use

<b>FILING FEE RECEIVED</b> 896	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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